

State:	District of Columbia	Filing Company:	Berkshire Life Insurance Company of America
TOI/Sub-TOI:	H111 Individual Health - Disability Income/H111.007 Long Term - Related to marketing with employer or association groups		
Product Name:	1627 SLP RATES		
Project Name/Number:	/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	0.000%
Effective Date of Last Rate Revision:	
Filing Method of Last Filing:	

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Berkshire Life Insurance Company of America	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

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Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		1627 Rate Pages	1627 (09/13), 1627-A (09/13)	New		1600 generic rate pages Student Loan Rider.pdf

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

1600 (06/10) Individual Disability Income Policy

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Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 3 and 3M

Unisex Select 10 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			11.44	10.07	
19			11.44	10.07	
20			11.44	10.07	
21			11.44	10.07	
22			11.44	10.07	
23			11.44	10.07	
24			11.44	10.07	
25			11.44	10.07	
26			11.73	10.32	
27			12.06	10.61	
28			12.44	10.95	
29			12.89	11.34	
30			13.41	11.80	
31			14.02	12.34	
32			14.74	12.98	
33			15.58	13.71	
34			16.55	14.56	
35			17.66	15.54	
36			18.93	16.65	
37			20.36	17.91	
38			21.98	19.35	
39			23.80	20.94	
40			25.82	22.72	
41			27.85	24.50	
42			30.08	26.47	
43			32.55	28.64	
44			35.25	31.02	
45			38.21	33.62	

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 4 and 4M

Unisex Select 10 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
18			9.39	8.26	
19			9.39	8.26	
20			9.39	8.26	
21			9.39	8.26	
22			9.39	8.26	
23			9.39	8.26	
24			9.39	8.26	
25			9.39	8.26	
26			9.62	8.47	
27			9.89	8.70	
28			10.20	8.98	
29			10.57	9.30	
30			11.00	9.68	
31			11.50	10.12	
32			12.09	10.64	
33			12.78	11.25	
34			13.58	11.95	
35			14.49	12.75	
36			15.53	13.67	
37			16.71	14.71	
38			18.04	15.88	
39			19.53	17.20	
40			21.20	18.66	
41			22.86	20.12	
42			24.70	21.73	
43			26.72	23.52	
44			28.95	25.48	
45			31.39	27.62	

Berkshire Life Insurance Company of America
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Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 5 and 5M

Unisex Select 10 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			7.45	6.56	
19			7.45	6.56	
20			7.45	6.56	
21			7.45	6.56	
22			7.45	6.56	
23			7.45	6.56	
24			7.45	6.56	
25			7.45	6.56	
26			7.64	6.73	
27			7.85	6.91	
28			8.10	7.13	
29			8.39	7.38	
30			8.73	7.68	
31			9.13	8.04	
32			9.60	8.45	
33			10.14	8.92	
34			10.78	9.48	
35			11.50	10.12	
36			12.33	10.85	
37			13.27	11.67	
38			14.32	12.60	
39			15.51	13.64	
40			16.83	14.80	
41			18.14	15.97	
42			19.60	17.25	
43			21.21	18.66	
44			22.98	20.22	
45			24.92	21.93	

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Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 6 and 6M

Unisex Select 10 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			5.87	5.16	
19			5.87	5.16	
20			5.87	5.16	
21			5.87	5.16	
22			5.87	5.16	
23			5.87	5.16	
24			5.87	5.16	
25			5.87	5.16	
26			6.01	5.29	
27			6.18	5.44	
28			6.38	5.61	
29			6.61	5.82	
30			6.88	6.05	
31			7.19	6.33	
32			7.56	6.65	
33			7.99	7.03	
34			8.49	7.47	
35			9.06	7.97	
36			9.71	8.54	
37			10.45	9.19	
38			11.28	9.93	
39			12.21	10.74	
40			13.25	11.66	
41			14.29	12.57	
42			15.44	13.59	
43			16.70	14.70	
44			18.09	15.93	
45			19.62	17.26	

Berkshire Life Insurance Company of America
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Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 3 and 3M

Unisex Select 15 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			15.60	13.73	
19			15.60	13.73	
20			15.60	13.73	
21			15.60	13.73	
22			15.60	13.73	
23			15.60	13.73	
24			15.60	13.73	
25			15.60	13.73	
26			16.16	14.22	
27			16.81	14.79	
28			17.56	15.45	
29			18.43	16.22	
30			19.41	17.08	
31			20.53	18.07	
32			21.78	19.18	
33			23.20	20.42	
34			24.78	21.82	
35			26.54	23.36	
36			28.48	25.06	
37			30.61	26.94	
38			32.95	29.00	
39			35.51	31.25	
40			38.30	33.70	

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 4 and 4M

Unisex Select 15 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			12.77	11.23	
19			12.77	11.23	
20			12.77	11.23	
21			12.77	11.23	
22			12.77	11.23	
23			12.77	11.23	
24			12.77	11.23	
25			12.77	11.23	
26			13.23	11.64	
27			13.76	12.11	
28			14.38	12.66	
29			15.09	13.28	
30			15.91	13.99	
31			16.83	14.80	
32			17.86	15.72	
33			19.03	16.74	
34			20.33	17.89	
35			21.77	19.16	
36			23.36	20.56	
37			25.12	22.11	
38			27.04	23.80	
39			29.14	25.65	
40			31.43	27.66	

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 5 and 5M

Unisex Select 15 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			10.14	8.92	
19			10.14	8.92	
20			10.14	8.92	
21			10.14	8.92	
22			10.14	8.92	
23			10.14	8.92	
24			10.14	8.92	
25			10.14	8.92	
26			10.50	9.25	
27			10.93	9.62	
28			11.42	10.05	
29			11.98	10.55	
30			12.63	11.11	
31			13.36	11.75	
32			14.18	12.48	
33			15.10	13.29	
34			16.14	14.20	
35			17.28	15.21	
36			18.55	16.32	
37			19.94	17.55	
38			21.46	18.89	
39			23.13	20.35	
40			24.94	21.95	

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Pittsfield, Massachusetts

Policy Form 1627 (09/13)

True Own Occupation Student Loan Protection Rider on Individual Disability Income Policy

Occupation Classes 6 and 6M

Unisex Select 15 Year Benefit

Level Annual Premiums per \$100 MI

Issue Age	Elimination Period				
	30	60	90	180	360
					720
18			7.98	7.02	
19			7.98	7.02	
20			7.98	7.02	
21			7.98	7.02	
22			7.98	7.02	
23			7.98	7.02	
24			7.98	7.02	
25			7.98	7.02	
26			8.27	7.28	
27			8.60	7.57	
28			8.99	7.91	
29			9.44	8.30	
30			9.94	8.75	
31			10.51	9.25	
32			11.17	9.83	
33			11.89	10.47	
34			12.70	11.18	
35			13.60	11.98	
36			14.60	12.85	
37			15.69	13.82	
38			16.89	14.87	
39			18.21	16.03	
40			19.64	17.29	

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)
Student Loan Protection Rider
Occupation Classes 6 & 6M
All Premium Structures, Elimination Periods, Benefit Periods, Unisex
Modified Own Occupation Definition of Disability Base Policy

The annual premium for each \$100 of monthly indemnity will be 98% of the annual premium, without policy fee, that would be required to purchase the same amount of indemnity under the Student Loan Protection Rider, policy form 1627 (09/13), with a true own occupation definition of disability.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)
Student Loan Protection Rider
Occupation Classes 5 & 5M
All Premium Structures, Elimination Periods, Benefit Periods, Unisex
Modified Own Occupation Definition of Disability Base Policy

The annual premium for each \$100 of monthly indemnity will be 96% of the annual premium, without policy fee, that would be required to purchase the same amount of indemnity under the Student Loan Protection Rider, policy form 1627 (09/13), with a true own occupation definition of disability.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)
Student Loan Protection Rider
Occupation Classes 4 & 4M
All Premium Structures, Elimination Periods, Benefit Periods, Unisex
Modified Own Occupation Definition of Disability Base Policy

The annual premium for each \$100 of monthly indemnity will be 94% of the annual premium, without policy fee, that would be required to purchase the same amount of indemnity under the Student Loan Protection Rider, policy form 1627 (09/13), with a true own occupation definition of disability.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Policy Form 1627 (09/13)
Student Loan Protection Rider
Occupation Classes 3 & 3M
All Premium Structures, Elimination Periods, Benefit Periods, Unisex
Modified Own Occupation Definition of Disability Base Policy

The annual premium for each \$100 of monthly indemnity will be 92% of the annual premium, without policy fee, that would be required to purchase the same amount of indemnity under the Student Loan Protection Rider, policy form 1627 (09/13), with a true own occupation definition of disability.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

CALCULATION OF CLASS OF RISK PREMIUMS

Select class of risk premium rates are shown in the rate manual. To calculate premiums for other classes of risk, multiply the premium rate for each coverage by the following factors:

Class of Risk	Factor
Preferred	0.95
Select	1.00
Standard	1.30

CALCULATION OF MODAL PREMIUMS

Mode	Factor
Annual	1.000000
Semi-Annual	0.515000
Quarterly	0.262650
Monthly	0.085833
Guard-o-matic	0.083333

The modal premium is the modal factor times the premium and rounded to the nearest cent.

State:	District of Columbia	Filing Company:	Berkshire Life Insurance Company of America
TOI/Sub-TOI:	H111 Individual Health - Disability Income/H111.007 Long Term - Related to marketing with employer or association groups		
Product Name:	1627 SLP RATES		
Project Name/Number:	/		

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter All Filings		
Comments:			
Attachment(s):			
DC Rate Filing Cover Letter_1627.pdf			

		Item Status:	Status Date:
Bypassed - Item:	Certificate of Authority to File		
Bypass Reason:	N/A - Not a third party submission.		

		Item Status:	Status Date:
Satisfied - Item:	Actuarial Memorandum		
Comments:			
Attachment(s):			
1600 Actuarial Memorandum DC 021913.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Actuarial Justification		
Comments:	See page 6 of the Actuarial Memorandum.		

		Item Status:	Status Date:
Satisfied - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		
Comments:	See page 9 of the Actuarial Memorandum.		

		Item Status:	Status Date:
Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		
Bypass Reason:	New rate filing, not a rate change.		

Item Status:	Status Date:
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State:	District of Columbia	Filing Company:	Berkshire Life Insurance Company of America
TOI/Sub-TOI:	H111 Individual Health - Disability Income/H111.007 Long Term - Related to marketing with employer or association groups		
Product Name:	1627 SLP RATES		
Project Name/Number:	/		

Bypassed - Item:	Rate Summary Worksheet		
Bypass Reason:	N/A - Not a rate increase.		

February 19, 2013

District of Columbia Department of Insurance Securities and Banking
Insurance Products Division
810 1ST ST NE Suite 701
Washington DC 20002

Re: Berkshire Life Insurance Company of America
NAIC No.: 71714 FEIN: 75-1277524
Individual Disability Income Form and Rate Factor Filing
Optional Rider with Rates
Company Filing Number: 1627 SLP Rates

To Whom It May Concern,

Berkshire Life Insurance Company of America ("Berkshire Life") is submitting the rider listed below for your review and approval. The riders will be used with policy 1500 (06/10), which was approved in your state on 3/4/2010, File Number GARD-126519934.

Form 1627 (09/13) is new and do not replace any previously approved forms or applications. As this is a new rider, there are currently no DC policyholders that have the rider on a policy.

Student Loan Rider -Form 1627 (09/13) & 1627-A (09/13) is a reducing term rider that provides a reimbursement of student loan payments when an insured is disabled. It pays a benefit equal to the total student loan payments up to the maximum benefit amount.

The proposed effective date for this rider is September 2013.

Overall, this filing only has a premium impact to DC policyholders who apply for, and are issued, this rider.

Sincerely,

A handwritten signature in black ink, appearing to read "Donna K. Owens", with a stylized flourish at the end.

Donna K. Owens

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Actuarial Memorandum

Riders on Policy Form 1600 (06/10)

1627 (09/13) Student Loan Protection Rider

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Purpose

The purpose of this memorandum is to certify that the premiums for the policy form shown on the cover page of this memorandum satisfy state requirements. This memorandum should not be used for any other purpose.

A new rider to policy form 1600 (06/10) is being submitted. The new rider is the Student Loan Protection Rider. This filing does not include any changes in rates for previously filed coverages.

This filing applies only to new business and new coverages added to existing policies. The new coverages may be added to policy form 1600 (06/10). Premium rates on inforce business will not change due to the non-cancelable nature of the policy form.

Benefits

Policy form 1627 pays a monthly benefit if the insured is disabled due to an injury or a sickness. Benefits are paid, after the insured has satisfied an elimination period, for a time up to the maximum benefit period of the rider. The policy forms are noncancellable and guaranteed renewable until the expiration date of the rider.

For policy benefits, totally disabled means that, due to sickness or injury, the insured is unable to perform the material and substantial duties of his or her occupation. This definition of disability will be hereafter referred to as true own occupation. The definition of disability may be changed to include the requirement that the insured is not gainfully employed, hereafter referred to as modified own occupation.

Benefits for mental or substance-related disorders may be limited to 24 months during the insured's lifetime.

Student Loan Protection Rider offers a 10 year or 15 year benefit from the issuance of the policy to cover student loan obligations. This rider is a reimbursement benefit. This rider only pays benefits for total disability.

Rate Tables

The issue ages for the rider are 18 – 45 for 10 year coverage and 18 – 40 for the 15 year coverage.

The premiums vary by the following factors:

- Age: Issue age
- Sex: Unisex
- Underwriting Class: Preferred, Select, Standard
- Definition of Disability: Modified Own Occupation or True Own Occupation
- Maximum Benefit Period: 10 year or 15 year coverage

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

- Elimination Period: 90 days, or 180 days
- Occupation Class: 6, 5, 4, 3, 6M, 5M, 4M, 3M
- Premium Structure: Level Only

The attached rate tables reflect the different premium rates based on issue age, attained age, sex, maximum benefit period, elimination period, occupation class, and premium structure.

The available discounts are the same as the discounts available on the base policy.

The premium modal factors are shown in Table 1 below:

Table 1: Modal Factors Applied to Annual Premiums

Mode	Factor
Annual	1.000000
Semi-Annual	0.515000
Quarterly	0.262650
Monthly	0.085833
Guard-o-matic	0.083333

Marketing Method

Policies will be marketed to individuals through career agents and independent brokers. The target market is small business owners and professionals.

Underwriting

The policy form is subject to medical and financial underwriting. Medical underwriting may include application questions, lab tests, inspection reports, MIB reports, attending physician statements, and physician or para-medical exams. Financial underwriting may also be used to verify income.

Pricing Assumptions

The gross premiums for this policy form were developed in a manner such that, along with investment income from accumulated assets, these premiums would be sufficient to fund future benefits and expenses, and provide the company with a reasonable profit margin. This is the method described on pages 196-202 of the Society of Actuaries textbook *Health Insurance Provided Through Individual Policies*, Second Edition, by E.L. Bartleson.

1. Morbidity

The claim incidence and claim termination rate assumptions for the base policy and disability riders were developed by making adjustments to the 1985 Commissioner's Individual Disability Table (1985 CIDA) based on the experience of Berkshire Life Insurance Company of America and industry experience.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Exhibit 1 contains sample claim costs for the base policy and selected riders. The claim costs for other riders were developed similarly. Exhibit 2 contains the projected experience for a cohort of newly-issued business.

2. Policy Termination Rates

The policy termination rates used in pricing are shown in Table 2 below, and they include terminations due to death.

Table 2: Policy Termination Rates

Policy Duration	Issue Age			
	25	35	45	55
1	6%	6%	5%	6%
2	5%	5%	5%	6%
3	5%	5%	4%	6%
4	4%	4%	4%	5%
5	4%	4%	4%	5%
6	3%	3%	4%	5%
7	3%	3%	3%	6%
8	3%	3%	3%	6%
9	3%	3%	3%	7%
10	3%	3%	3%	8%
11	3%	3%	3%	9%
12	3%	3%	3%	9%
13	2%	2%	4%	9%
14	2%	2%	4%	10%
15	2%	2%	4%	10%
16	2%	2%	4%	10%
17	2%	2%	4%	10%
18	2%	2%	4%	10%
19	2%	2%	4%	10%
20	2%	2%	4%	10%
21+	2%	2%	4%	10%

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

3. Expenses

The expense assumptions for a cohort of business are shown in Table 3 below:

Table 3: Expense Assumptions (Combined Base Policy & Rider)

Category	First Year	Renewal Years
Maintenance	5.4% of premium	5.4% of premium
Premium Tax	2% of premium	2% of premium
Claim Expense: Initial	\$4,925 per claim	\$4,925 per claim
Claim Expense: Ongoing	3.7% of paid claims	3.7% of paid claims
Acquisition	\$929 per policy 15% of premium	N/A

4. Commissions

The commission schedule varies by policy duration. The commissions, including field compensation, bonuses and agency funding, are shown in Table 4 below.

Table 4: Commission Rates by Policy Duration and Issue Age (Includes Bonuses and Field Compensation)

Policy Year	All Issue Ages
1	102.5%
2 – 5	19.8%
6 – 10	15.8%
11+	7.2%

5. Interest Rate

The interest rate used in pricing is 5.5%

6. Issue Ages

The issue ages for the policy form are shown below.

Category	Level Premiums	Graded Premiums
Student Loan Protection Rider (10 Year Term)	18 - 45	N/A
Student Loan Protection Rider (15 Year Term)	18 - 40	N/A

7. Average Premium

The average premium for policy form 1600, including riders, is expected to be \$2,682.

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

8. Medical Trend

Medical trend does not apply to disability income insurance

9. Profit Margin

The anticipated profit margin for this product is 10 - 15% of premium.

Certification

I, Paul N. Houston, am an Assistant Actuary for Berkshire Life Insurance Company of America. I am a member of the American Academy of Actuaries and I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

The expected loss ratio was determined by computing the ratio of the present value of future expected claim costs to the present value of future expected gross premiums, using the same persistency, interest, and morbidity assumptions as used in developing the gross premiums.

The expected loss ratio for the policy form in this filing is at least 50%. To the best of my knowledge and judgment, these premiums comply with the laws and regulations of the state, and the benefits are actuarially justified (reasonable in relation to the premiums).



Paul N. Houston, FSA, MAAA
Assistant Actuary
Berkshire Life Insurance Company of America

September 26, 2012

Date

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Exhibit 1

Annual Claim Costs per \$100 Monthly Indemnity

Select Class of Risk

Occupation Class 5

90-day Elimination Period

10-Year Coverage

Student Loan Protection Rider

Policy Year	Female Issue Age			Policy Year	Male Issue Age		
	25	35	45		25	35	45
1	9.95	8.49	25.87	1	7.98	4.04	10.92
2	9.59	9.17	25.82	2	7.47	4.11	11.53
3	9.34	9.75	25.38	3	7.00	4.20	11.97
4	9.24	10.17	24.64	4	6.56	4.22	12.22
5	9.23	10.34	23.24	5	6.06	4.18	12.29
6	9.17	10.80	21.24	6	5.51	4.15	11.91
7	8.94	10.20	18.64	7	4.91	3.90	11.08
8	8.30	8.95	14.99	8	4.09	3.37	9.45
9	6.76	6.52	10.08	9	2.89	2.43	6.66
10	2.26	1.77	2.51	10	0.76	0.64	1.70
11	-	-	-	11	-	-	-
12	-	-	-	12	-	-	-
13	-	-	-	13	-	-	-
14	-	-	-	14	-	-	-
15	-	-	-	15	-	-	-
16	-	-	-	16	-	-	-
17	-	-	-	17	-	-	-
18	-	-	-	18	-	-	-
19	-	-	-	19	-	-	-
20	-	-	-	20	-	-	-

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Exhibit 1

Annual Claim Costs per \$100 Monthly Indemnity

Select Class of Risk

Occupation Class 5

90-day Elimination Period

15-Year Coverage

Student Loan Protection Rider

Policy Year	Female Issue Age		Policy Year	Male Issue Age	
	25	35		25	35
1	12.65	11.35	1	10.30	5.44
2	12.43	12.61	2	9.83	5.70
3	12.40	13.87	3	9.49	6.03
4	12.64	15.11	4	9.22	6.34
5	13.14	16.26	5	8.93	6.67
6	13.76	18.10	6	8.69	7.13
7	14.48	18.93	7	8.53	7.48
8	15.18	19.57	8	8.33	7.73
9	15.79	19.71	9	8.10	7.89
10	16.25	19.34	10	7.81	7.90
11	16.25	18.36	11	7.38	7.70
12	15.97	16.36	12	6.73	7.21
13	14.61	13.42	13	5.77	6.19
14	11.44	9.23	14	4.15	4.39
15	3.54	2.36	15	1.12	1.14
16	-	-	16	-	-
17	-	-	17	-	-
18	-	-	18	-	-
19	-	-	19	-	-
20	-	-	20	-	-

Berkshire Life Insurance Company of America
Pittsfield, Massachusetts

Exhibit 2: Anticipated Loss Ratios

Policy Form 1600

Base Policy & Student Loan Protection Rider

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	950,000	323,037	34%
2	896,013	319,399	36%
3	851,443	317,309	37%
4	811,869	317,362	39%
5	781,641	318,946	41%
6	753,387	329,808	44%
7	731,421	331,781	45%
8	711,060	335,824	47%
9	690,811	337,714	49%
10	670,476	335,546	50%
11	568,984	318,245	56%
12	555,765	322,566	58%
13	543,273	324,773	60%
14	533,379	325,251	61%
15	524,398	321,509	61%
16	489,297	333,062	68%
17	482,100	330,375	69%
18	475,148	333,118	70%
19	468,761	333,224	71%
20	461,263	330,200	72%
21	328,083	271,222	83%
22	325,657	273,379	84%
23	323,563	273,416	85%
24	322,038	270,727	84%
25	320,832	264,597	82%
26	319,374	274,388	86%
27	317,400	261,023	82%
28	317,349	256,860	81%
29	319,532	248,790	78%
30	324,085	236,473	73%
31	170,110	125,469	74%
32	176,394	124,081	70%
33	182,070	121,416	67%
34	186,633	116,907	63%
35	187,586	109,863	59%
36	187,008	112,757	60%
37	183,268	101,000	55%
38	179,602	95,961	53%
39	176,010	88,370	50%
40	172,490	77,921	45%
Lifetime Loss Ratio			50%